

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-470)							SERIAL NO.		FILING DATE				
							APPLICANT(S)						
CLAIMS													
	AS FEE		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			NO.	DEF.	NO.	DEF.	NO.	DEF.
	NO.	DEF.	NO.	DEF.	NO.	DEF.							
1							61						
2							62						
3							63						
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46							96						
47							97						
48							98						
49							99						
60							100						
TOTAL NO.	4						TOTAL NO.						
TOTAL DEF.	2						TOTAL DEF.						